

State of New Hampshire

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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NICHOLAS A. TOUMPAS
COMMISSIONER

December 3, 2012

Richard R. McGreal
Associate Regional Administrator
Centers for Medicare and Medicaid Services
JFK Federal Building
Room 2275
Boston, MA 02203

RE: December Monthly New Hampshire Care Management Update

Dear Mr. McGreal:

In your correspondence of August 24, 2012, approving New Hampshire's §1932(a) Medicaid State Plan amendment, you requested monthly updates commencing October 1, 2012. The updates are to include information regarding:

- A) each health plan's network;
- B) the readiness of the MMIS to send eligibility to plans and receive encounter data;
and
- C) the State's readiness to manage the health plans.

This letter is our third monthly report. I hope that if there is information that requires further development, you can provide us feedback for the next report. If there is information in the report that raises concerns, I hope you will reach out to us right away so that we can resolve issues of concern.

A. Each Health Plan's Network

The table below represents network development to date. To avoid confusion we are only populating columns where adequacy has been met based on contract requirements, however detailed geomapping is available for confirmation purposes. In this way, progress from one monthly report to the next will be more apparent. Where no information is populated, there is not yet progress to report in this format.

You will note that there is no change from last month's report. While the plans are reporting some progress in areas, the Department has not yet verified the adequacy and prudence dictates that we only populate data that has been verified.

New Hampshire MCO Access Monthly Compliance Report - 10/26/12

Counties	Hospital Access	Primary Care Access	Specialty Care Access	Pharmacy Access	Behavioral Health
Belknap County				2 MCO's	
Carroll County				2 MCO's	
Cheshire County				2 MCO's	
Coos County				1 MCO	
Grafton County				2 MCO's	
Hillsborough County				2 MCO's	
Merrimack County				2 MCO's	
Rockingham County				2 MCO's	
Strafford County				2 MCO's	
Sullivan County				2 MCO's	

B. Readiness of the MMIS to Send Eligibility to Plans and Receive Encounter Data

Please refer to the table below for MMIS readiness.

New Hampshire Care Management System Interface Testing Status

Interfaces*	Syntax	Targeted Scenarios #1	Targeted Scenarios #2	Volume	Automated File Exchange
	Is the data being received in the correct format.	Specific scenarios have been identified as part of the test file. Checking to see if the data related to the scenarios is received, makes sense, and processed correctly.	More complex scenarios have been identified as part of the test file. Checking to see if the data related to the scenarios is received and processed correctly.	Sending a large volume of records to ensure it can be processed correctly.	Utilizing the Xerox EDI Gateway, files can be uploaded and downloaded through automated processes.
834 Enrollment	3 Successful	3 Successful	3 Successful	3 Successful	3 Successful

New Hampshire Care Management System Interface Testing Status (*continued*)

Inbound Enrollment Changes	Not Started				
Outbound Provider	3 Successful	Not Applicable	Not Applicable	3 Successful	In Process
Inbound Provider Network	3 Successful	3 Successful	3 Successful	In Process	2 Successful 1 In Progress
Outbound Medical Service Authorizations	Not Started				
Inbound Medical Service Authorizations	Not Started				
Outbound Pharmacy Service Authorizations	In Process				
Inbound Pharmacy Service Authorizations	Not Started				
Outbound Third Party Liability	Not Started				
Inbound Third Party Liability	Not Started				
Outbound Claims	Not Started				
Inbound 837 Encounters	Not Started				

C. The State's Readiness to Manage the Health Plans

Since our last report, the Department has instituted weekly meetings of what is known as the 'Core Panel', a cross sectional interdisciplinary team of subject matter experts from across the Department, each with an interest in the success of the contract and care management. Attendees include clinical staff, long term care staff, SURS, TPL, legal, and senior managers. The Medicaid Director and another member of the Commissioner's Policy Team facilitate these meetings. Formal agendas are created and distributed in advance and detailed minutes are taken. There are several goals for these meetings, the first of which is to facilitate communication among the many staff who are working on the care management initiative and also to have discussion and achieve closure on issues that arise through the account managers from the MCO's themselves.

The Core Panel, with the support of the account team, is about to commence document review and approval. The Department did suffer a false start to this process when just prior to Thanksgiving we attempted to start document review by having our MCAC take the first review of marketing materials and member handbooks. However, this approach proved frustrating for the MCAC members who participated because basic corrections such as the proper titling of NH based resources or providers had not already been made or flagged by Department reviewers.

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For this reason, the Department has redesigned the process of document review and approval to start with the Core Panel subject matter expert who will either work with the MCO for necessary changes or recommend approval of the document as-is prior to the document being shared with the MCAC.

Though regulations only require MCAC consultation on marketing materials, the MCAC early on declared an interest in seeing more than just marketing materials and the Department is involving them in the review of many more documents than just the marketing materials. All understand that this represents a large time commitment but that the investment of time up front will yield reward down the line.

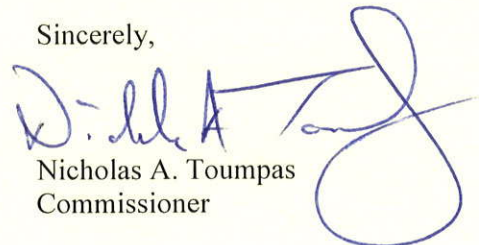
The account team continues its weekly calls with the MCOs on operational matters and subject specific meetings also take place on an ad hoc basis. To date, several meetings regarding utilization management, enrollment and behavioral health have already taken place.

The account team is also working on guidance for the MCOs regarding the development of Program Management Plans as required by the contract, to achieve greater consistency in the work product among the three MCOs.

Finally, in early November, New Hampshire elected a new governor. The New Hampshire Governor-elect is Maggie Hassan (D). Governor Elect Hassan has experience in New Hampshire government from her prior service as a State Senator. The Commissioner and his Policy Team have commenced discussions with the Governor-elect and her transition team about many important topics at the Department including the Care Management Initiative. At this point in time, the Department cannot predict how or if the change in State leadership will affect this project.

Thank you for taking the time to review our monthly report. As ever, if there are matters of concern, we hope you will inform us right away. If there are areas that you would like to learn more about, please feel free to mention them on one of our weekly technical assistance calls.

Sincerely,



Nicholas A. Toumpas
Commissioner